

Regional Interagency Coordinating Committee

Minutes from 05-17-05

1. Welcome/Any needed introductions
2. Review of Agenda and Minutes/Questions on Updates
 - Sandy McMerty made a motion to approve the Minutes. The Minutes were approved.
 - RICC members who were present met from 9:04 a.m. to 9:14 a.m.
 - Training with Geneva Woodruff - Michelle said the biggest emphasis is on change on how we were to deliver services; it is primarily working with a coaching model with parents.
 - Roxane suggested the next thing to tackle in August is Natural Environments Cluster because at that point Geneva will have been back and the Early Intervention work plan would have been completed, we can also address compliance issues through there.
3. Child Find Partners
 - Sandy McMerty and Connie Schwartz welcomed and introduced themselves to the Child Find partners.
 - Roxane Romanick gave an overview of RICC to the partners.
 - Introductions were made. Present: Lisa Keidel, Jody Bettger-Huber, Bette Hendrickson, Tamara Unterscher, Jessica Bauer, Margaret LoMurray, Toni Hoffman, Lori Bergquist, Laura Hiatt, Joce Koch, Kristin Hertz, Julie Zent, , Marylu Weber, Heather Lundeen, Beth Thune, Becky Matthews, Joyce McDowell, Deb Bohn, Wendi Glass, Shelly Simon, Florence Ducheneaux, Deb Tibor, Michelle Hougen, Kathy Lampman, Camille Eisenmann, Cyndee McLeod, Carol Nichols, Shelly Hauge, Lorri Sandal, Tedi Claymore, Paula Gayton, Sandy McMerty, Nicole Trebilt, Connie Schwartz, Roxane Romanick
 - Committee broke up into small groups
 - Small groups presented their work to the large group. Summary of small groups included.
 - Child Find partners were free to leave the meeting at 11:02 a.m.
 - RICC members continued to meet
4. RICC - Childfind Priorities
 - Target Concerns Handout
 - Grant County - Right Track will have someone going to Grant County
 - Outreach to Ft. Berthold - Dorothy said they have a lot of concerns when they met with them. They don't know for sure where to go to. Roxane informed the committee that Ft. Berthold is served by four regions. Connie asked if that is something that needs to go to the State ICC. Michelle and Florence thought it was a good idea. Roxane said Verl Walking Elk has a contract with the state to be tribal

liaison. His responsibility is to pull the four tribal entities together on a regular basis. Roxane said we could suggest that to them and see what they say. Sandy asked what region is going to step up and accept responsibility? Roxane suggested doing a general recommendation to the State ICC to consider general consolidation with Ft. Berthold.

- 6. Determining # of preschoolers served - Roxane has not received all the information yet. This will be tabled. Roxane suggested bringing this in to the transition piece to take at a little closer. Roxane will look at this next week to pull the information together.
- 5. Overall rate of eligibility determinations - Dickinson and Fargo have 90% eligibility rate, Connie asked why is that a concern? Isn't it better to refer more kids? Roxane said the issue is that the group has to address it because it sets a pace. The problem with low percentage is staff time with taking evaluations, how time and effort put in evaluations vs. service.
- Sandy asked if there are any numbers in the compliance data that we should cue in to. Roxane said the numbers in general aren't down; we're well above the 212, the same with Right Track's numbers. Roxane suggested looking at the action steps we currently have, do we want to continue them, anything new want to add? Concerns still about Sioux County, want to do something in recommendation of Ft. Berthold, discussion of rate of eligibility will be tabled.
- 7. Require agency and family survey - Sandy said she really likes the single point of entry. Lorri wondered if people really understand it. Roxane said with the screenings there really isn't a single point of entry.
- Report on Quality Improvement Plan Action Steps
Recommended changes will be made on Quality Improvement Plan.

5. Parent Survey input
6. Approval of Task Calendar
7. Agenda Topics - June meeting
8. Adjourn

SMALL GROUP WORK

Child/Family Concerns:

- 😊😊 • Parents need immediate assistance and information
- 😊😊😊😊😊 • Education/literature to childcare providers on talking to parents about screenings
 - Awareness around children being expelled from childcare/preschool
 - Education of developmental milestones for parents
 - More general information fact sheets around developmental issues
- 😊 • Parents need to feel empowered to advocate for their children
 - need an advocate

Child/Family Concerns

1 & 2 Calls from parents with question

- What's normal
- Questions about program
- How do you get kids to do.....
- 😊 • Parents' questions about discipline problems - what should

3. Talk to family/relatives

- 😊 • Pediatrician (slow to refer)
 - Friends
- 😊 • Daycare/preschool - area kids could be caught
 - Survey of parents - talk to physicians first
 - form - BAMBEE and RT - how presented (talk to doctors and nurses - short and forms helpful)
 - doctor approach - wait and see (not helpful)
- 😊 • Parent - fear of something wrong vs. confirming what parents already know
 - parents have right to know
 - services easier to access

Child/Family Concerns

- Frustration
- Experience
- Child abuse neglect
- Informal community referral - friends/family
- Parents stopping in asking questions

Concerns Communicated to Families

- Mailings
- Personal - one-on-one

Child/Family Concerns

- Ask questions - Well Baby Clinic
- See concerns - talk with parents
- Confusion on how to talk to doctor re: concerns
- Observation

- Other contacts in community
- Other family members
- ☺• Go first - other family members/people close to - Right Track - doctor/nurse - Well Baby - County Health Nurse - books - intranet
- See concerns - refer them doctor, cross-referrals
- Give choices

❖ Someone Grant County do Right Track

Parents/☺Physicians confused about role of BECEP

Referral Process:

- ☺☺☺• Releases of information that include childcare provider
- Return information to referral source
- Inconsistent forms
- Behavior, vision, hearing, development.....
- ☺☺○ who does it? free?
 - diagram/map for where to go in your region
- Refugees - language barriers
 - Iraq/Kurdish

Referral Process

- Knowing who to refer to
- Developmental training
- Milestones
- ☺☺☺☺☺• Better feedback
- Making everything more available

Early Intervention Referral Process

- ☺☺☺• Don't get a contact back from EI (no coordination - IFP - should be involved barrier to referral)
- Going to person vs. agency (2 agencies) - confusing to parents - hospital/EI - competing
- ☺☺☺• Educating community - referrals to same point
- Getting past parent barriers (unforeseen beliefs of parents - i.e. "social worker")

EI Referrals

- ☺☺• Physicians network
 - talk to physician who makes referrals and get feedback
- Misperception of EI
- Ed ER and convenience clinic physicians
- Invite physicians to RICC committee

Screening

- 😊😊• More education on CAPTA
 - Early signs often missed
 - Developmental screenings in childcare settings?
 - 😊○ on-site services (vision, development,)
 - more convenient for families
 - parents don't have the time
- 😊• Developmental screenings should be as important as immunizations

Screening Methods

- 😊😊😊• Present as normal - like immunizations
 - Hospital packet (too much at once) - parents don't understand
 - Give at prenatal or $\frac{1}{2}$ month check-up
 - If NICU - they get served; if not NICU no service

Needs

- 😊😊😊😊• Educate doctors and all community - i.e. MOPS, churches, daycare providers, MOMS club - people go to churches - food, shelter

Screening Methods

- 😊• Information given out to newborn parents - but make sure there's F/V if say they will be contacted
 - Get information out - institutionalize it - don't forget about toddlers
- 😊😊😊• Time/reimbursement concerns physicians to developmental screenings - partner with physicians - team approach
- 😊• Need to look at overlap/multiple screenings
 - Education
- 😊• Communication (improve)
 - calling tree
 - OK with NICU, difficulty to other areas
 - education physicians

Screening Methods

Know who is being followed

Screening

- Incentives
- Reminders
- Public announcements
- Only has 2 chances to make appointments

Outreach to Diverse Populations

- Home base services
- 😊😊😊• Making sure we have good information to all the agencies that serve diverse populations
 - Give specific information when talking to family

- referral cards??
- AARC

Outreach to Diverse Populations

- 😊• 1 & 2 Teenage mothers
 - Revolving caretakers
- 😊😊○ Mobile families (migrant families)
- 😊○ Rural - lack of other family support, services
 - Low income families - if I can get to services? just trying to survive
 - Refugee (non-English speaking)
 - Abusive households
 - Children of incarcerated parents
 - Belief of parents - they make too much money
- 3 & 5 services already present
 - Custer Health
 - Baby Face
 - be sensitive to children speaking native language
 - office vs. home visit or other neutral place besides home
 - educate doctors in that area
 - coming from different culture - no established trust

Outreach Diverse Populations

At Risk

- 😊😊😊😊😊• Transient, unreceptive parents/losing track, rural (limited resources/not know where to go), lower socioeconomic status, no healthcare coverage
- Listening first, Head Start (relationship) - effective strategies working with parents
- Difficult when parent/child not qualifies for EI
- Better reach families Standing Rock - giving more time/more information
- Follow family even if they don't want services at that time
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Diverse Populations

- New colony (Grant County)
- 😊😊• Rural